

Surgical antibiotic prophylaxis: skin and soft tissue surgery

This table summarises information in *Therapeutic Guidelines* about the indications and first-line regimens for surgical antibiotic prophylaxis. See <u>Therapeutic Guidelines</u> for detailed and up-to-date information, including adjustment of antibiotic choice, dosing and timing based on specific patient factors.

Infective endocarditis prophylaxis may be required for patients with specific cardiac conditions who are undergoing a procedure for which surgical antibiotic prophylaxis is not required—see <u>Therapeutic Guidelines</u> for indications and regimens.

If surgical antibiotic prophylaxis is indicated, a single preoperative dose of antibiotic(s) is sufficient for the significant majority of procedures. In specific circumstances, a repeat intraoperative dose may also be necessary—see <u>Therapeutic Guidelines</u> for discussion.

For a small minority of procedures (see Notes column), there are inadequate data to show that a single dose of surgical antibiotic prophylaxis is as effective as 24 hours of prophylaxis. For these procedures, postoperative doses can be considered but prophylaxis should not continue beyond 24 hours.

This table should be used in conjunction with clinical judgement. Prescribers should consider the harm-benefit profile of a drug in each patient (eg consider potential drug interactions).

Procedures	Is surgical antibiotic prophylaxis indicated?	Surgical antibiotic prophylaxis regimens	Notes
ablative laser facial resurfacing procedures	CONSIDER perioperative antiviral prophylaxis, particularly for patients who have had previous orofacial HSV infection	If indicated, start prophylaxis the morning of the procedure: aciclovir 400 mg orally, 12-hourly for 10 days OR famciclovir 250 mg orally, 12-hourly for 10 days OR valaciclovir 500 mg orally, daily for 10 days	
blepharoplasty	NO		
breast surgery	see specific section in <u>Therapeutic Guidelines</u> .		
head and neck surgery	see specific section in <u>Therapeutic Guidelines</u> .		
oral maxillofacial surgery	see specific section in <u>Therapeutic Guidelines</u> .		
rhytidectomy	NO		
clean or clean-contaminated procedures not listed above	NO		For stratification of surgical wounds, see <u>Therapeutic Guidelines</u> . This advice also applies to procedures that breach the oral mucosa.
HSV = herpes simplex virus			

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